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PTO/SB/50 (4/98)

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Box Reissue Commissioner For Patents Washington, DC 20231	Attorney Docket No.	18602-06587
	First Named Inventor	Guy G. Riddle
	Original Patent Number	5,999,971
	Original Patent Issue Date (Month/Day/Year)	December 7, 1999
Express Mail Label No.	E1599907741US	

COPY 1

APPLICATION FOR REISSUE OF:
(check applicable box)

Utility Patent Design Patent Plant Patent

APPLICATION ELEMENTS		ACCOMPANYING APPLICATION PARTS
1. <input type="checkbox"/> *Fee Transmittal Form ((PTO/SB/56) (Submit an original, and a duplicate for fee processing)		7. <input type="checkbox"/> Statement of status/support for all changes to the claims. See 37 CFR 1.173(c).
2. <input checked="" type="checkbox"/> Specification and Claims (amended, if appropriate)		8. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
3. <input checked="" type="checkbox"/> Drawing(s) (proposed amendments, if appropriate)		9. <input type="checkbox"/> English Translation of Reissue Oath/Declaration (if applicable)
4. <input checked="" type="checkbox"/> Reissue Oath/Declaration (unsigned) (37 C.F.R. § 1.175)(PTO/SB/51 or 52)		10. <input type="checkbox"/> *Small Entity <input type="checkbox"/> Statement filed in prior application, Statement(s) Status still proper and desired (PTO/SB/09-12)
5. Original U.S. Patent		11. <input checked="" type="checkbox"/> Preliminary Amendment and Statement of status/support for all changes to the claims. See 37 CFR 1.173(c).
<input type="checkbox"/> Original U.S. Patent for Surrender		12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
<input type="checkbox"/> Ribboned Original Patent Grant		13. <input type="checkbox"/> Other: _____
<input type="checkbox"/> Statement of Loss (PTO/SB/55)		_____
6. Original U.S. Patent currently assigned?		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(If Yes, check applicable box(es))		
<input type="checkbox"/> Written Consent of all Assignees (PTO/SB/53)	*NOTE FOR ITEMS 1 & 10: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).	
<input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney		

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